This report is being submitted on behalf of an individual MS4.
Fill in SPDES ID in upper right hand corner.

Name of MS4

OR

This report is being submitted on behalf of a Single Entity
(Per Part II.E of GP-0-10-002)
Name of Single Entity

OR

This is a joint report being submitted on behalf of a coalition.
Provide SPDES ID of each permitted MS4 included in this report. Use page 2 if needed.
Name of Coalition

Cover Page 1 of 2
Provide SPDES ID of each permitted MS4 included in this report.

<table>
<thead>
<tr>
<th>SPDES ID</th>
<th>SPDES ID</th>
<th>SPDES ID</th>
</tr>
</thead>
<tbody>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
<tr>
<td>SPDES ID</td>
<td>SPDES ID</td>
<td>SPDES ID</td>
</tr>
<tr>
<td>NYR20A</td>
<td>NYR20A</td>
<td>NYR20A</td>
</tr>
</tbody>
</table>
Each MS4 must submit an MCC form.

Section 1 - MCC Identification Page

Indicate whether this MCC form is being submitted to certify endorsement or acceptance of:

- An Annual Report for a single MS4
- A Single Entity (Per Part II.E of GP-0-10-002)
- A Joint Report

Joint reports may be submitted by permittees with legally binding agreements.

If Joint Report, enter coalition name:
MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2018

Name of MS4: PORT WASHINGTON NORTH

SPDES ID: NYR20A438

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for each of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form).
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

- Principal Executive Officer/Chief Elected Official
- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name: ROBERT

MI: S

Last Name: WEITZNER

Title: MAYOR

Address: 3 PLEASANT AVENUE

City: PT. WASHINGTON

State: NY

Zip: 11050

eMail: MAYOR@PORTWASHINGTONNORTH.ORG

Phone: (516) 883-5900

County: NASSAU
**Section 2 - Contact Information**

Important Instructions - Please Read

Contact information must be provided for **each** of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:
- Principal Executive Officer/Chief Elected Official
- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

<table>
<thead>
<tr>
<th>First Name</th>
<th>MI</th>
<th>Last Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SHARON</td>
<td></td>
<td>NORTON REMMER</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td>538 BROAD HOLLOW ROAD 4TH FL EAST</td>
<td>MELVILLE</td>
<td>NY</td>
<td>11747</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>eMail</th>
</tr>
</thead>
<tbody>
<tr>
<td><a href="mailto:SREMMER@H2M.COM">SREMMER@H2M.COM</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>(631) 756-8000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>County</th>
</tr>
</thead>
<tbody>
<tr>
<td>SUFFOLK</td>
</tr>
</tbody>
</table>

Name of MS4: PORT WASHINGTON NORTH

SPDES ID: NYR20A438
MS4 Municipal Compliance Certification (MCC) Form
MCC form for period ending March 9, 2018

Name of MS4: PORT WASHINGTON NORTH
SPDES ID: NYR20A438

Section 3 - Partner Information
Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?
○ Yes  ● No

If Yes, complete information below.
Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.
If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name
MANHATTAN BAY PROTECTION

Partner/Coalition Name (con’t.)
COMMITTEE

SPDES Partner ID - If applicable
NYR20

Address
15 VANDERVENTER AVENUE

City
PORT WASHINGTON
State
NY
Zip
11050-3710

eMail
MBPC Execute@Gmail.com

Phone
(516) 869-7983

Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.? ○ Yes  ● No

What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)?

● MM1 MULTIPLE TASKS
● MM2 MULTIPLE TASKS
● MM3 WATER QUALITY MONITORING OTHER
● MM4 EDUCATION MONITORING FOR RUNOFF
● MM5 EDUCATION MONITORING FOR RUNOFF
● MM6 EDUCATION

Additional tasks/responsibilities
● Watershed Improvement Strategy Best Management Practices required for MS4s in impaired watersheds included in GP-0-08-002 Part IX.

Education and literature on stormwater runoff, pet waste, pathogens, water fowl, Onsite Wastewater Treatment Systems.
MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2018

Name of MS4: PORT WASHINGTON NORTH

SPDES ID: NYR20A438

Section 4 - Certification Statement

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-08-002 Part VI.J.

First Name: ROBERT

MI: S

Last Name: WEITZNER

Title: MAYOR

Signature

Date: 05/31/2018

Send completed form and any attachments to the DEC Central Office at:

MS4 Permit Coordinator
Division of Water
4th Floor
625 Broadway
Albany, New York 12233-3505

MCC Page 4
MS4 Annual Report Form
This report is being submitted for the reporting period ending March 9, 2018.
If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition: PORT WASHINGTON NORTH
SPDES ID: NY 201438

Water Quality Trends

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s are contributed to this report? 0 0 1

1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure One.

If Yes, choose one of the following

- Report(s) attached to the annual report
- Web Page(s) where report(s) is/are provided below

Please provide specific address of page where report(s) can be accessed - not home page.

URL
WWW.MANHASSETBAYPROTECTIONCOMMITTEE.ORG/WATERQUALITY.HTM

URL

URL

URL

URL
MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2018

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition: PORT WASHINGTON NORTH

SPDES ID: NYR20A438

Minimum Control Measure 1. Public Education and Outreach

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 0 0 1

1. Targeted Public Education and Outreach Best Management Practices

Check all topics that were included in Education and Outreach during this reporting period:

- Construction Sites
- General Stormwater Management Information
- Household Hazardous Waste Disposal
- Illicit Discharge Detection and Elimination
- Infrastructure Maintenance
- Smart Growth
- Storm Drain Marking
- Green Infrastructure/Better Site Design/Low Impact Development

- Other: BOAT PUMP OUT SEPTIC MAINTENANCE

2. Specific audiences targeted during this reporting period:

- Public Employees
- Contractors
- Residential
- Developers
- Businesses
- General Public
- Restaurants
- Industries
- Other: Agricultural

STUDENTS, BOATERS AND HOMEOWNERS
3. What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

- Construction Site Operators Trained
- Direct Mailings
- Kiosks or Other Displays
- List-Serves
- Mailing List
- Newspaper Ads or Articles
- Public Events/Presentations
- School Program
- TV Spot/Program
- Printed Materials:
  - Locations (e.g. libraries, town offices, kiosks)
    - Village Office
    - Harborfest
    - Earth Day
  - Other:
    - Facebook
- Web Page: Provide specific web addresses - not home page. Continue on next page if additional space is needed.
  - URL
    - www.manhassetbayprotectioncommittee.org/publicationsandmaterials.html

Note - there should be underscores in the above where spaced.
# MS4 Annual Report Form

This report is being submitted for the reporting period ending **March 9, 2018**

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition: **PORT WASHINGTON NORTH**

SPDES ID: **NYR20A438**

### 3. Web Page con't.: Provide specific web addresses - not home page.

<table>
<thead>
<tr>
<th>URL</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><a href="http://www.manhassetbayprotectcommittee.org/waterquality.htm">http://www.manhassetbayprotectcommittee.org/waterquality.htm</a></td>
<td></td>
</tr>
<tr>
<td><a href="http://www.getpumpedli.org/resources/">www.getpumpedli.org/resources/</a></td>
<td></td>
</tr>
<tr>
<td><a href="http://www.manhassetbayprotectcommittee.org/PDF_PUBLIC/">http://www.manhassetbayprotectcommittee.org/PDF_PUBLIC/</a></td>
<td></td>
</tr>
<tr>
<td>note - there should be underscores in the above where spaced</td>
<td></td>
</tr>
</tbody>
</table>

---

MCM 1 Page 3 of 4
4. Evaluating Progress Toward Measurable Goals MCM 1

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Village will provide residents with MS4 education information in the on-line newsletter and on the stormwater page. It will continue to publicize MBPC information on the stormwater page of the website. The Village will provide stormwater information on the kiosk at the Village Hall.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Village's newsletter, which included information regarding stormwater, was sent out to 1,450 residents and businesses. It included an article about the importance of not dumping anything in storm drains. The Village continued participation in MBPC events and posted MBPC educational information on its website.

C. How many times was this observation measured or evaluated in this reporting period? 0 0 0 3

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this Measurable Goal during this reporting period? Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Village will provide residents with MS4 education information in the on-line newsletter and on the stormwater page. It will continue to publicize MBPC information on the stormwater page of the website. The Village will provide stormwater information on the kiosk at the Village Hall. The Village will enhance the interactive touch screen kiosk with MS4 information. It will also prepare a newsletter with stormwater information to be mailed to residents and businesses.
**Minimum Control Measure 2. Public Involvement/Participation**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 0 0 1

1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:

- Cleanup Events
- Comments on SWMP Received
- Community Hotlines
- Community Meetings
- Plantings
- Storm Drain Markings
- Stakeholder Meetings
- Volunteer Monitoring
- Other:

<table>
<thead>
<tr>
<th>Opportunity</th>
<th># Events</th>
<th># Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cleanup Events</td>
<td>0 0 0 0 2</td>
<td></td>
</tr>
<tr>
<td>Comments on SWMP Received</td>
<td>0 0 0 0 0</td>
<td></td>
</tr>
<tr>
<td>Community Hotlines</td>
<td>Phone # (5 1 6)</td>
<td>Phone # (8 8 3) - 5 9 0 0</td>
</tr>
<tr>
<td>Community Meetings</td>
<td># Attendees: 0 0 0 0 8</td>
<td></td>
</tr>
<tr>
<td>Plantings</td>
<td></td>
<td>Sq. Ft.</td>
</tr>
<tr>
<td>Storm Drain Markings</td>
<td># Drains</td>
<td></td>
</tr>
<tr>
<td>Stakeholder Meetings</td>
<td># Attendees: 0 0 1 2 0</td>
<td># Events: 0 0 0 1 3</td>
</tr>
<tr>
<td>Volunteer Monitoring</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided?

- Yes  ○ No

- List-Serve
- Newspaper Advertising
- TV/Radio Notices
- Other: V I L L A G E H A L L

○ Web Page URL: Enter URL(s) on the following two pages.
MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2018.

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition: PORT WASHINGTON NORTH

SPDES ID: NYR20A438

2. URL(s) con't.:
   Please provide specific address(es) where notice(s) can be accessed - not home page.
MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2018.
If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition: PORT WASHINGTON NORTH

SPDES ID: NYR20A438

2. URL(s) con't.:
Please provide specific address(es) where notices can be accessed - not home page.

  URL

  URL

  URL

  URL

  URL

  URL

  URL

  URL

  URL

  URL
MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2018.
If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition: PORT WASHINGTON NORTH

SPDES ID: NYR20A438

3. Where can the public access copies of this annual report, Stormwater Management Program (SWMP) Plan and submit comments on those documents?

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

○ MS4/Coalition Office

Department: VILLAGE HALL
Address: 3 PLEASANT AVENUE
City: PORT WASHINGTON NY Zip: 11050
Phone: (516) 883-5900

○ Library

Address
City
Zip
Phone

○ Other

Address
City
Zip
Phone

○ Web Page URL:

WWW.PORTWASHINGTONGNORTH.ORG/?PAGEID=144

Please provide specific address of page where report can be accessed - not home page.

○ eMail

MAYOR@PORTWASHINGTONGNORTH.ORG

Comments
**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 2018.

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition: PORT WASHINGTON NORTH

SPDES ID: NYR20A438

4.a. If this report was made available on the internet, what date was it posted?

   Leave blank if this report was not posted on the internet.

          05/15/2018

4.b. For how many days was/will this report be posted?

          365

If submitting a report for single MS4, answer 5.a. If submitting a joint report, answer 5.b..

5.a. Was an Annual Report public meeting held in this reporting period?  Yes  No

     If Yes, what was the date of the meeting?

          05/16/2018

     If No, is one planned?

          Yes  No

5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?  Yes  No

     If No, is one planned for each?

          Yes  No

6. Were comments received during this reporting period?  Yes  No

     If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.
7. Evaluating Progress Toward Measurable Goals MCM 2

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Village will continue to maintain its membership with the MBPC so residents of the Village have a broad selection of programs to participate in. The Village will initiate a clean up in Bay Walk Park.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Village coordinated an Earth Day clean up with the Tree Huggers and Residents Forward groups.

C. How many times was this observation measured or evaluated in this reporting period?

0 0 0 1

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

● Yes ○ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

○ Yes ● No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Village will continue to maintain its membership with the MBPC so residents of the Village have a broad selection of programs to participate in. The Village will initiate a clean up in Bay Walk Park.
Minimum Control Measure 3. Illicit Discharge Detection and Elimination

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 001

1. Enter the number and approx. percent of outfalls mapped: 00017 # 100%

2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)? 000

3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?

- Auto Recyclers
- Building Maintenance
- Churches
- Commercial Carwashes
- Commercial Laundry/Dry Cleaners
- Construction Vehicle Washouts
- Cross-Connections
- Distribution Centers
- Food Processing Facilities
- Garbage Truck Washouts
- Hospitals
- Improper RV Waste Disposal
- Industrial Process Water
- Other:

- Landscaping (Irrigation)
- Marinas
- Metal Plateing Operations
- Outdoor Fluid Storage
- Parking Lot Maintenance
- Printing
- Residential Carwashing
- Restaurants
- Schools and Universities
- Septic Maintenance
- Swimming Pools
- Vehicle Fueling
- Vehicle Maint./Repair Shops
- None

- Sewersheds:

Name of MS4/Coalition: PORT WASHINGTON NORTH

SPDES ID: NYR20A438

This report is being submitted for the reporting period ending March 9, 2018

PORT WASHINGTON NORTH NYR20A438

00017 100

000

000

000

000

000

000

000

000

000

000

000

000
3.b. What types of illicit discharges have been found during this reporting period?

- Broken Lines From Sanitary Sewer
- Cross Connections
- Failing Septic Systems
- Floor Drains Connected To Storm Sewers
- Illegal Dumping
- Other: [ ] None

4. How many illicit discharges/potential illegal connections have been detected during this reporting period? 0 0 0

5. How many illicit discharges have been confirmed during this reporting period? 0 0 0

6. How many illicit discharges/illegal connections have been eliminated during this reporting period? 0 0 0

7. Has the storm sewershed mapping been completed in this reporting period? Yes [ ] ❎ No [ ] 1 0 0 %
   If No, approximately what percent was completed in this reporting period?

8. Is the above information available in GIS? Yes [ ] ❎ No [ ]
   Is this information available on the web? Yes [ ] ❎ No [ ]
   If Yes, provide URL(s):
   Please provide specific address of page where map(s) can be accessed - not home page.
   URL
   [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

MS4 Annual Report Form
This report is being submitted for the reporting period ending March 9, 2018.
If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition: PORT WASHINGTON NORTH

SPDES ID: NYR20A438

COMMENTS:
8. **URL(s) con't.:**
   Please provide specific address of page where map(s) can be accessed - not home page

<table>
<thead>
<tr>
<th>URL</th>
<th>URL</th>
<th>URL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

9. Has an IDDE law been adopted for each traditional MS4 and/or have IDDE procedures been approved for all non-traditional MS4s contributing to this report?  
   ● Yes  ○ No

10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law?  
    ● Yes  ○ No  ○ NT

11. What percent of staff in relevant positions and departments has received IDDE training?  
    000%
MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2018.

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition: PORT WASHINGTON NORTH

SPDES ID: NYR20A438

12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Village will implement a dry weather outfall monitoring program after completion of a Water Quality Improvement Project that is being conducted to inventory Village conveyances.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

This goal was not met.

C. How many times was this observation measured or evaluated in this reporting period? 0001 (ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period? ○ Yes ● No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? ○ Yes ● No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Village will implement a dry weather outfall monitoring program.
MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2018.

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition: PORT WASHINGTON NORTH

SPDES ID: NYR20A438

Minimum Control Measures 4 and 5.
Construction Site and Post-Construction Control

The information in this section is being reported (check one):

On behalf of an individual MS4
On behalf of a coalition

How many MS4s contributed to this report? 001

1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities?

Yes  No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook?

Yes  No  NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.

09/2004  03/2006  NT

2. Does your MS4/Coalition have a SWPPP review procedure in place?

Yes  No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

000

4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs?

Yes  No  NT

If Yes, how many public comments were received during this reporting period?

000

5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process?

Yes  No
6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

<table>
<thead>
<tr>
<th>Type</th>
<th>Actions</th>
<th>Authority</th>
</tr>
</thead>
<tbody>
<tr>
<td>Notices of Violation</td>
<td>0 0 0 0</td>
<td>No Authority</td>
</tr>
<tr>
<td>Stop Work Orders</td>
<td>0 0 0 0</td>
<td>No Authority</td>
</tr>
<tr>
<td>Criminal Actions</td>
<td>0 0 0 0</td>
<td>No Authority</td>
</tr>
<tr>
<td>Termination of Contracts</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administrative Fines</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Civil Penalties</td>
<td>0 0 0 0</td>
<td>No Authority</td>
</tr>
<tr>
<td>Administrative Orders</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enforcement Actions or Sanctions</td>
<td>0 0 0 0</td>
<td>No Authority</td>
</tr>
<tr>
<td>Other</td>
<td>0 0 0 0</td>
<td>No Authority</td>
</tr>
</tbody>
</table>
**Minimum Control Measure 4. Construction Site Stormwater Runoff Control**

The information in this section is being reported (check one):

- On behalf of an individual MS4
- **On behalf of a coalition**

How many MS4s contributed to this report? 0 0 1

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?</td>
<td></td>
<td>0 0 0</td>
</tr>
<tr>
<td>2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?</td>
<td></td>
<td>0 0 0</td>
</tr>
<tr>
<td>3. What percent of active construction sites were inspected during this reporting period?</td>
<td></td>
<td>1 0 0 %</td>
</tr>
<tr>
<td>4. What percent of active construction sites were inspected more than once?</td>
<td></td>
<td>1 0 0 %</td>
</tr>
<tr>
<td>5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? □ Yes □ No □ NT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? □ Yes □ No □ NT</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? □ Yes □ No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.
MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2018

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition: PORT WASHINGTON NORTH

SPDES ID: NYR20A438

6. con't.: Submit additional pages as needed.

- MS4/Coalition Office
  Department: VILLAGE HALL
  Address: 3 PLEASANT AVENUE
  City: PORT WASHINGTON NY 11050
  Zip:
  Phone: (516) 883-5900

- Library
  Address:
  City: Zip:
  Phone: (516) -

- Other
  Address:
  City: Zip:
  Phone: (516) -

- Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

  URL:
  URL:
  URL:

MCM 4 Page 2 of 3
MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2018.

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition: PORT WASHINGTON NORTH

SPDES ID: NYR20A438

7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Village will continue to monitor active construction sites and will refer plans for disturbance of > 40,000 to their consultant for review.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

There were no construction sites in this reporting period that required SWPPP reviews or inspection.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period? ○ Yes ● No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP? ○ Yes ● No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Village will continue to monitor active construction sites and will refer plans for disturbance of > 40,000 to their consultant for review.

MCM 4 Page 3 of 3
Ms4 Annual Report Form
This report is being submitted for the reporting period ending March 9, 2018.
If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition: PORT WASHINGTON NORTH
SPDES ID: NYR20A438

Minimum Control Measure 5. Post-Construction Stormwater Management

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? 001

1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?

<table>
<thead>
<tr>
<th>Type of Practice</th>
<th># Inventoried</th>
<th># Inspections</th>
<th># Times Maintained</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alternative Practices</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Filter Systems</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Infiltration Basins</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Open Channels</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ponds</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wetlands</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance?

- Yes
- No

3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?

- Building Codes
- Municipal Comprehensive Plans
- Overlay Districts
- Open Space Preservation Program
- Zoning
- Local Law or Ordinance
- None
- Land Use Regulation/Zoning
- Watershed Plans
- Other Comprehensive Plan
- Other:

MCM 5 Page 1 of 3
**MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9, 2018.

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition: PORT WASHINGTON NORTH

SPDES ID: NYR20A438

4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?

○ Yes  ● No

4b. Does the MS4 have a banking and credit system for stormwater management practices?

○ Yes  ● No

4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?

○ Yes  ● No

4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

000

5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impact Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

000 %
6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Village is considering the adoption of modifications to the Building Code to limit lot coverage.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Modifications to the Zoning Code to limit building lot coverage are still under discussion.

C. How many times was this observation measured or evaluated in this reporting period?

D. Has your MS4 made progress toward this measurable goal during this reporting period?

○ Yes   ● No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

○ Yes   ● No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Village will continue to discuss modifications to the Zoning Code to limit building lot coverage.
Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- [ ] On behalf of an individual MS4
- [x] On behalf of a coalition

How many MS4s contributed to this report? 001

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program (SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

<table>
<thead>
<tr>
<th>Operation/Activity/Facility</th>
<th>Addressed in SWMP?</th>
<th>years?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Maintenance</td>
<td>○ Yes ● No</td>
<td>○ Yes ● No</td>
</tr>
<tr>
<td>Bridge Maintenance</td>
<td>○ Yes ● No</td>
<td>○ Yes ● No</td>
</tr>
<tr>
<td>Winter Road Maintenance</td>
<td>○ Yes ● No</td>
<td>○ Yes ● No</td>
</tr>
<tr>
<td>Salt Storage</td>
<td>○ Yes ● No</td>
<td>○ Yes ● No</td>
</tr>
<tr>
<td>Solid Waste Management</td>
<td>○ Yes ● No</td>
<td>○ Yes ● No</td>
</tr>
<tr>
<td>New Municipal Construction and Land Disturbance</td>
<td>○ Yes ● No</td>
<td>○ Yes ● No</td>
</tr>
<tr>
<td>Right of Way Maintenance</td>
<td>○ Yes ● No</td>
<td>○ Yes ● No</td>
</tr>
<tr>
<td>Marine Operations</td>
<td>○ Yes ● No</td>
<td>○ Yes ● No</td>
</tr>
<tr>
<td>Hydrologic Habitat Modification</td>
<td>○ Yes ● No</td>
<td>○ Yes ● No</td>
</tr>
<tr>
<td>Parks and Open Space</td>
<td>○ Yes ● No</td>
<td>○ Yes ● No</td>
</tr>
<tr>
<td>Municipal Building</td>
<td>○ Yes ● No</td>
<td>○ Yes ● No</td>
</tr>
<tr>
<td>Stormwater System Maintenance</td>
<td>○ Yes ● No</td>
<td>○ Yes ● No</td>
</tr>
<tr>
<td>Vehicle and Fleet Maintenance</td>
<td>○ Yes ● No</td>
<td>○ Yes ● No</td>
</tr>
<tr>
<td>Other</td>
<td>○ Yes ● No</td>
<td>○ Yes ● No</td>
</tr>
</tbody>
</table>
MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2018.

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition PORT WASHINGTON NORTH  SPDES ID NYR20A438

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept)
- Streets Swept (Number of miles X Number of times swept)
- Catch Basins Inspected and Cleaned Where Necessary
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary
- Phosphorus Applied In Chemical Fertilizer
- Nitrogen Applied In Chemical Fertilizer
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)

3. How many stormwater management trainings have been provided to municipal employees during this reporting period? 0 0 0 0 0

4. What was the date of the last training? 1/1/2018

5. How many municipal employees have been trained in this reporting period? 0 0 0

6. What percent of municipal employees in relevant positions and departments receive stormwater management training? 0 0 0 %
7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Village will stencil or install medallions on storm drains and will consider legislation to prohibit goose feeding.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Medallions stating "No Dumping Drains to Bay" were placed on all storm drains. Village streets were swept 14 times during the reporting period.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

○ Yes  ○ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

○ Yes  ● No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Village will consider legislation to prohibit good feeding.